Evidence/Guidance Community Window

Evolving Description of ACTS Collaborative Participant's COVID-19 Knowledge Ecosystem Efforts

This page is for organizations focused on synthesizing evidence and producing clinical guidance to document best practices, tools, resources, needs, and other aspects of their work. The purpose of the documentation is to facilitate the uptake of high-quality evidence and guidance into clinical decision support and performance measures, to highlight best practice, and to foster inter-agency cooperation and support within the knowledge ecosystem for COVID-19 and beyond. The first set of tables apply broadly to COVID-19 (and other targets), and the second set of tables refer to evidence and guidance specifically related to the Collaborative's current focus targets; i.e., COVID-19 testing and triage, and anticoagulant use.

Those providing data for these tables should consider, "What do you want those who seek to implement 'living guidance' to know about evidence synthesis and guidance development strategies and tools to make their efforts more successful? Likewise, "What do *you* want to know about efforts of others working in the knowledge ecosystem to make your efforts more successful?"

If you have been requested to provide information for these tables by a project lead and need a Word version to do this, use this document.

Forms from Collaborative Participants

- COVID-END
- COVID-NMA

Overarching Description of Evidence Synthesis/Guideline Development Community Best Practices, Tools, Resources

	Identify (Search/Screen) Primary Studies (See this CoP page)	Synthesize Evidence (including Assessing Quality) (See this CoP page)
Current Approach ¹		From COVID-END: Identify published systematic and rapid reviews from trusted sources (including VA ESP Covid-19 Evidence Reviews and Cochrane) and present these in the COVID-END inventory Categorise into four mutually exclusive taxonomies: clinical management, public health measures, health system arrangements and economic and social resources. Add decision-relevant information to each document included in the inventory in order to support easier assessments of relevance, including: • flagging review search dates (to support assessments of how up-to-date the evidence is); appraising and reporting quality using AMSTAR 1 tool (to provide information about the quality of each review); • identifying which reviews are living and which have a GRADE evidence profile; and • creating declarative titles for ease of understanding and applicability for policymaker end user. From COVID-NMA Initiative:
		 For each new RCT record and publish key information in a trial network map Undertake risk of bias assessment Extract data relating to pre-determine outcomes, create and publish forest plots of quantitative data as appropriate Undertake GRADE evidence profiles for all comparisons Update and maintain GRADE evidence profiles as more trials are published

Pearls /Tips Learned /Tools	(From Sara Loree: CDC and WHO are combining their COVID databases; OSF database of COVID-19 intervention trials; WHO Librarian Reserve Corps) We have determined that monitoring and searching the two sources above precludes the need for other individual database searches. (COVID-NMA Initiative)	From COVID-END Match response to need (in this case, a prototypical 25-year-old policy analyst being asked by senior decision-makers for best evidence across a broad range of issues on very short timelines) Use an online administrative interface for processing records (rather than Excel) and a more elegant front-end solution for displaying the inventory • Resources and tools for researchers considering and conducting COVID-19 evidence syntheses (From COVID-END Synthesizing WG) • (from Sara Loree: OSF protocol for living evidence summary) • We have developed a tool for monitoring the preprint servers to identify changes to the data presented. (COVID-NMA Initiative)
Desired Approach	Map of all RCTs for prevention and treatment of COVID-19 including vaccines and rehabilitation. (COVID-NMA Initiative)	We have initiated communication with all trialists to try to ensure consistent approaches e.g. selection of outcomes, reduction of risk of bias, and to invite them to contribute missing data. We also aim to request individual participant data. (COVID-NMA Initiative)
Needs to Achieve Desired Approach	Check all that apply Better source/input materials [Details:] Common format/terminologies for managing/sharing data [Details:] Other [Details:] Check all that apply (COVID-NMA Initiative) Better source/input materials [Details:] x_Common format/terminologies for managing/sharing data [Details:] Other [Details:]	From COVID-END: _x_Better source/input materials [Details:] Harvest from all high-yield, high-quality sources _x_Common format/terminologies for managing/sharing data [Details:] COVID-END taxonomy _x_Consistency of outcomes [Details:] _x_Engagement with primary researchers and upstream stakeholders [Details: When gaps in the best-available evidence related to the pandemic response are identified (e.g., a taxonomy category in the inventory has no high-quality evidence synthesis available) engaging researchers and research funders may help to set priorities for research needed to fill gaps)] _x_Engagement with decision makers and other downstream stakeholders [Details:] Regulator interactions with government officials in many Canadian provinces and in many other countries Check all that apply (COVID-NMA Initiative) _x_Better source/input materials [Details:] Common format/terminologies for managing/sharing data [Details:] _x_Engagement with primary researchers and upstream stakeholders [Details:] Other [Details:]

Support You Can	Living network mapping of RCTs: Metadata and other details of primary	From COVID-END
Provide Other Participa nts	studies included in our evidence syntheses (COVID-NMA Initiative)	The COVID-END Inventory aims to identify best current evidence in the four taxonomies, and to identify those reviews that are living, up to date, high quality and where there is a GRADE evidence profile. Inventory also provides link to the underlying reviews in addition to outputs described above.
		COVID-END has also established an international horizon scanning group that meets monthly, an equity group that aims to identify means of increasing the visibility of measures aimed at reducing inequity, and aims also to commission living systematic reviews to address high priority areas that may not have been sufficiently addressed by evidence synthesis researchers.
		Further outputs include resources for researchers and guidelines developers that are proposing to conduct a systematic review or develop clinical practice guidelines – aimed at reducing inadvertent and inappropriate duplication of effort and increasing the quality of reviews and guidelines produced
		Living comprehensive assessment of all RCTs that address prevention and treatment of COVID-19

For this row and the next, include URLs/pointers to documents outlining steps to accomplish the tasks, tools that support this work and/or other items critical for others working along the evidence/knowledge to know about to make their work optimally efficient, appropriate and effective.

Living evidence syntheses and network meta-analysis as appropriate. (COVID-NMA Initiative)

	Produce Guidance (See this CoP page)	Make Guidance Computable (See this CoP page)
Current Approach		
Pearls/Tips Learned/Tools	2011 NAM (IOM) Standards for Guidelines	
Desired Approach		
Needs to Achieve Desired Approach	Check all that apply Better source/input materials [Details:] Common format/terminologies for managing/sharing data [Details:] Other [Details:]	Check all that apply Better source/input materials [Details:] Common format /terminologies for managing /sharing data [Details:] Other [Details:]
Support You Can Provide Other Participants	COVID-Evidence Project - building a database to gather all the evidence around a drug (University of Basil - currently focused on hydroxychloroquine, but model could be adaptable to other targets) Identification of sources to identify primary studies - validation study of specialized COVID-19 databases (systematic reviewers are going to different sources - this effort is to identify best practices) Advocate for librarian representation in searches and reviews - leverage skillsets/best practices in this work [SLMC]: close gaps between needs that clinicians are seeing on the front line and topics covered in reviews guidelines	

Current			
Approach			
Pearls/Tips Learned/Tools			
Desired Approach			
Needs to Achieve Desired Approach	Check all that apply Better source/input materials [Details:] Common format/terminologies for managing/sharing data [Details:] Other [Details:]	Check all that apply Better source/input materials [Details:] Common format/terminologies for managing/sharing data [Details:] Other [Details:]	Check all that apply Better source/input materials [Details:] Common format/terminologies for managing/sharing data [Details:] Other [Details:]
Support You Can Provide Other Participants			

Stakeholders can place comments at the bottom of any Learning Community page. If you need editing access to these Participant Window pages, please contact support@ahrq-acts.org.

Drill Down into Evidence Synthesis/Guideline Development Community Best Practices, Tools, Resources For ACTS Collaborative Focus Targets

COVID-19 Testing/Triage (ED and ambulatory settings)

	Identify (Search/Screen) Primary Studies	Synthesize Evidence (including Assessing Quality)
Current		
Approach		
Pearls/Tips Learned/Tools		BMJ EBM rapid review on COVID tests
Desired Approach		
Needs to Achieve Desired Approach	Check all that apply Better source/input materials [Details:] Common format/terminologies for managing /sharing data [Details:] Other [Details:]	Check all that apply Better source/input materials [Details:] Common format/terminologies for managing/sharing data [Details:] Consistency of outcomes [Details:] Engagement with primary researchers and upstream stakeholders [Details:] Engagement with decision makers and other downstream stakeholders [Details:] Other [Details:]
Support You Can Provide Other Participants		

	Produce Guidance	Make Guidance Computable
Current		
Approach		
Pearls/Tips Learned/Tools		
Desired Approach		

Needs to Achieve Desired Approach	Check all that apply	Check all that apply
7.66.	Better source/input materials [Details:]	Better source/input materials [Details:]
	Common format/terminologies for managing /sharing data [Details:]	Common format/terminologies for managing /sharing data [Details:]
	Other [Details:]	Other [Details:]
Support You Can Provide Other Participants		

	Implement Guidance (e.g., as CDS, eCQMs)	Analyze Results (e.g., care outcomes)	Apply Results (e.g., Quality Improvement, create evidence)
Current			
Approach			
Pearls/Tips Learned/Tools			
Desired Approach			
Needs to Achieve Desired Approach	Check all that apply Better source/input materials [Details:] Common format/terminologies for managing/sharing data [Details:] Other [Details:]	Check all that apply Better source/input materials [Details:] Common format/terminologies for managing/sharing data [Details:] Other [Details:]	Check all that apply Better source/input materials [Details:] Common format/terminologies for managing/sharing data [Details:] Other [Details:]
Support You Can Provide Other Participants			

Anticoagulation

	Identify (Search/Screen) Primary Studies	Synthesize Evidence (including Assessing Quality)
Current Approach	Rapid Cochrane review on anticoagulation in COVID-19 patients	
Pearls/Tips Learned/Tools		
Desired Approach		
Needs to Achieve Desired Approach	Check all that apply Better source/input materials [Details:] Common format/terminologies for managing /sharing data [Details:] Other [Details:]	Check all that apply Better source/input materials [Details:] Common format/terminologies for managing/sharing data [Details:] Consistency of outcomes [Details:] Engagement with primary researchers and upstream stakeholders [Details:] Engagement with decision makers and other downstream stakeholders [Details:] Other [Details:]
Support You Can Provide Other Participants		

Current Approach		
Pearls/Tips Learned/Tools	 ASH Living Guideline on COVID anticoagulation and underlying justification and evidence tables (critically ill and acutely ill) L*VE/Epistemonikos search on antithrombotics; can send email when new study/review/guideline is published. 	
Desired Approach		
Needs to Achieve Desired Approach	Check all that apply Better source/input materials [Details:] Common format/terminologies for managing/sharing data [Details:] Other [Details:]	Check all that apply Better source/input materials [Details:] Common format/terminologies for managing/sharing data [Details:] Other [Details:]
Support You Can Provide Other Participants		

	Implement Guidance (e.g., as CDS, eCQMs)	Analyze Results (e.g., care outcomes)	Apply Results (e.g., Quality Improvement, create evidence)
Current			
Approach			
Pearls/Tips Learned/Tools			
Desired Approach			
Needs to Achieve Desired Approach	Check all that apply Better source/input materials [Details:] Common format/terminologies for managing/sharing data [Details:] Other [Details:]	Check all that apply Better source/input materials [Details:] Common format/terminologies for managing/sharing data [Details:] Other [Details:]	Check all that apply Better source/input materials [Details:] Common format/terminologies for managing/sharing data [Details:] Other [Details:]
Support You Can Provide Other Participants			